3-1999

Update - March 1999

Loma Linda University Center for Christian Bioethics

Loma Linda University Center for Christian Bioethics

Update

Volume 15, Number 1 (March 1999)

Mark Carr, Richard Rice and Siroj Sorajjakool join LLU Faculty of Religion

Three scholars, each of whom has served as a Christian minster and educator elsewhere, joined the Loma Linda University Faculty of Religion on a full-time basis during the 1998-99 school year. Although their areas of specialization differ, all three are already making positive contributions to the Center for Christian Bioethics and the Center for Spiritual Life and Wholeness in addition to their teaching and research, according to Gerald R. Winslow, PhD, dean of the Faculty of Religion and chair of the administrative committees of both organizations.

next column →

✦ Mark F. Carr, PhD joined the Faculty of Religion as assistant professor. A minister for the Seventh-day Adventist Church who has pastored in Palmer, Wasilla, and Talketna, Alaska, Dr. Carr received his doctorate in religious ethics in 1998 from the University of Virginia. While on that campus, he served as an editorial assistant for *Biolaw* and as a teaching assistant for a course in "Classical Islam."

He wrote his dissertation on *Temperance and Emotion in Moral Obligation,* a study that reflects his continuing interest in theories of virtue. While a graduate student, Dr. Carr received the Stead Fellowship from the Department of Religious Studies of the University of Virginia. He also completed a Clinical Biomedical Ethics Internship at the University of Virginia Medical Center.

Dr. Carr is married to Sharon, a drafter in the architectural services department on campus. They are the parents of a son, Tyler, age 11, and a daughter, Melissa, age 8. He is a member of four professional associations.

Although Carr has been an alumnus of the University of Virginia for less than a year, he has already published one article and three reviews. He has also made a number of public presentations

(continued on page 7)

Scholars, Clinicians, and Patients Highlight February Palliative Care Conference

Two hundred thirty participants from all parts of the United States gathered this year at Loma Linda University the last two days of February for a conference on palliative medicine entitled "End-of Life Care: What Hurts? What Works?" This conference, which was presented by the university's Center for Christian Bioethics and Center for Spiritual Life and Wholeness, featured scholars, clinicians and patients.

(continued on page 2)

Inside this issue:

"Faith-based Health Care in the 21st Century: New Visions from Old Values" Scheduled for 2000

Plans are now underway for the next conference to be presented by the Center for Christian Bioethics and the Center for Spiritual Life and Wholeness at Loma Linda University. Its theme will be "Faith-based Health Care in the 21st Century: New Visions from Old Values." It is scheduled for February 27 & 28, 2000.

This conference will discuss several different proposals as to how religiously motivated health-care professionals and institutions might best fulfill their missions in rapidly changing and often stressful environments. ♥

Palliative Care Conference

(continued from page 1)

James Wise, DDS, MS, a well-known Southern California orthodontist, captured the attention of the audience in his opening comments on "Sometimes the System Works; Sometimes It Doesn't: End-of-Life Care From a Family Perspective." Dr. Wise's comments centered on the events surrounding the terminal illness of his teenage son. Sandra L. Bertman, PhD, professor of Humanities at the University of Massachusetts, then spoke on "Last Rights/Last Rites: Decision-Making and Meaning-Making at the End of Life."

Dennis deLeon, MD and Ruthanne Williams, LCSW, family physician/clinical ethicist and social worker at LLU respectively, spoke on "Breaking Bad News—We All Have to Do It." Ronald Perkin, MD, MA, a pediatrician and clinical ethicist at LLU looked at the other side of this issue in a "What Works When You Hurt? Recognizing and Managing Caregiver Stress."

Gerald Winslow, PhD and David Larson, DMin, PhD, of the LLU Faculty of Religion concluded the first day of the conference by leading a high-spirited discussion of a Maren Monsen film titled *The Vanishing Line.* This conversation centered upon whether the husband who was featured in the film manipulated his terminally ill wife into accepting death too quickly.

Betty R. Ferrell, PhD, research scientist at the City of Hope National Medical Center, began the conference's second day by describing a project called "HOPE: Homecare Outreach for Palliative Care Education." Anne Cipta, MD, LLU anesthesiologist and Earl Quijada, MD, LLU family physician then discussed "What Works When It Hurts? Symptom Control in Palliative Care."

When the discussion turned to more philosophical and theological considerations of palliative care, two LLU Faculty of Religion professors, Ivan Blazen, PhD, (New Testament) and Richard Rice, PhD (Christian theology) examined "The Meaning of Pain and Suffering." This issue of *Update* includes a summary of Dr. Rice's remarks. A subsequent issue will contain Dr. Blazen's comments.

Lance Tyler, Hospice Chaplain, led a Loma Linda panel consisting of Louise Bell, volunteer coordinator, Sandra Cooper, RN, Steven Howard, PharmD, Luis Orozco, LCSW, and David Wilbur, MD on "The Hospice Experience."

Two Loma Linda experts on mirth as medicine, Lee Berk, DrPH, a researcher, and Sarah Uffindell, MD, a young physician doing a residency in neurology who is battling breast cancer, entertained and educated the participants in "Laughing When It Hurts: Laughter in Life-Threatening Illness."

In the final session of the conference, S. Kirk Payne, MD, internist, palliative care physician and clinical ethicist at the University of Iowa College of Medicine, provided an overview of "The New Discipline of Palliative Care." Kathy McMillan, RN, Randy Roberts, DMin, (religion), and Robert Orr, MD, (family medicine and clinical ethics) of Loma Linda explored support systems available to those who are suffering in "The Family is Still Alive."

Participants in the conference rated the experience very favorably in their final evaluations. They expressed particular appreciation for the presentations by Dr. Wise and Dr. Uffindell. By talking about their experiences as those who have been both providers and recipients of health care, they made helpful contributions to the thoughts and feelings of those who heard them.

Information about purchasing audio or video recordings of the conference presentations is available from Sigma Audio/Video Associates, P.O. Box 51, Loma Linda, CA 92354.♥

Update
Volume 15Number 1 (March 1999)

FAX: (909) 558-0336
Phone: (909) 558-4956
E-mail: gsample@ethicscenter.llu.edu
Web site: bioethics.llu.edu

THE MEANING OF PAIN AND SUFFERING

Richard Rice, PhD

Introduction

The challenge of making sense of suffering is always with us, but never more than when the end of life approaches. We naturally turn to religion to assist us in this task. But religion does not offer a uniform answer to the question of suffering, and people do not always respond to their religious background in expected ways. If religion is a genuine resource to sufferers, and to those who assist them, we need to clarify its role and acknowledge its limitations. Although we often speak of "the meaning of pain and suffering," that's not something religion provides. The real concern of religion is not suffering, it is the sufferer. Pain and suffering have no meaning in themselves, but we can find meaning in our sufferings.

On two occasions, according to the Gospels, Jesus had the opportunity to explain why tragedy strikes (John 9:1-3; Luke 13:1-5). Why do some people suffer, while others go free? Both times He turned the discussion in another direction. The important thing, He said in effect, is not the reason for suffering, but our response to suffering, not why we suffer but what we do when suffering comes.

Paradoxes

The experience of suffering presents us with a number of perplexing paradoxes. For most of human history, disease and death were part of everyday experience. People faced the pain life brought, did their best to cope with it and moved on. Ironically, however, the more effective our attempts have become to resist disease and death, the more perplexing they seem to be. Now, thanks to medical science, people suffer much less in life than they would have in the past, yet they are more upset by it than before. The less we have to suffer, it seems, the more our suffering bothers us.

Another paradox is the fact that suffering always seems to take us by surprise. Nothing is more obvious than the fact that everybody suffers, yet nothing seems more incomprehensible than my own suffering. As Elizabeth Kubler-Ross says of death, it comes to thee and to thee, but not to me. As William Saroyan supposedly said, "I knew that everybody died. But in my case I thought there would be an exception." There are no exceptions. Not even for nice people. Not even for religious people.

This brings us to another paradox—the strikingly different effects that suffering has on religion. On the one hand, suffering poses a tremendous challenge to faith. Philosophers and theologians regard it as the greatest challenge to religious belief. One says it's the only atheistic argument that deserves to be taken seriously. Another says that undeserved suffering is a greater obstacle to faith than all the theoretical and philosophical objections ever devised, all put together. It is the "rock on which atheism rests." At the same time, suffering sometimes has a positive effect on religious belief. Many people find themselves drawing closer to God when they suffer. A young woman I know who spent several years as a hospice worker said that in her experience nobody died an atheist. Everyone she knew came to terms with God in the end.

Of course, the greatest paradox suffering presents is the apparent discrepancy between the power of God and the realities of life. If God is all-powerful, why does anyone suffer? An Omnipotent Being has power to create any kind of world He wants to, and change anything in the world He wants to, instantaneously. If such a being existed, wouldn't He surely eliminate suffering, or prevent it, or at least limit it?

Historically, people have responded to this problem in two principal ways. One is to move suffering outside God's will, to maintain that God is not responsible for suffering. The most popular version of this approach appeals to free will. God endowed His creatures with the capacity to obey Him or to disobey. They disobeyed, and the world now suffers the consequences. So, it was human rebellion that ultimately accounts for the sorrows of the world. God did not cause it or will it. It was never God's plan that we suffer.

The contrasting response to the problem of evil is to place suffering inside God's will. Things may appear to be out of control, goes this line of thought, but God is nevertheless completely in charge of creation. And everything that happens has a place in His plan. We may not understand why God does things the way He does. But we can be sure that it is all for the best. Everything we go through, even the darkest chapters of our lives, is just what we need. God uses this painful process to develop our characters and bring us to moral perfection. In time, we will see that God's will is perfect.

Each of these responses generates a long list of questions. Some people can't understand how creatures who

Richard Rice, PhD
Professor of Religion, Theology, and Philosophy of Religion
Loma Linda University

were perfect at the moment of creation could ever rebel against their Maker. Others wonder why an all-powerful creator couldn't create beings who are free, but always use their freedom to do the right thing.

As for the other response, the idea that everything happens for the best seems contradicted by our experience. The soul-making, or character development God is bringing about doesn't seem very cost effective. Is it really necessary for us to suffer this much in order to learn the lessons we need to learn? History's horrendous evils hardly seem to justify whatever lessons we learn from them—if indeed we learn any.

There are responses to these questions and further questions about these responses, and so on, in an endless cycle of philosophical point-counterpoint. I admit that I enjoy such discussions. I think they serve an important purpose. But their value in showing us the meaning of suffering is limited. Each one gets us part way down the road, but none of them goes the distance and provides a satisfying solution to the problem of evil. And the obstacle that brings even the best of them to a halt is concrete human suffering. All the theories in the world can't stand up to the misery of a single sufferer.

One of the most powerful expressions of this insight comes from Dostoyevsky. In one passage in *The Brothers Karamazov,* the skeptical Ivan is challenging his brother Aloysha, a tender soul who has become a novice monk.

> "Imagine that you are building the edifice of human destiny with the object of making people happy in the finale, of giving them peace and rest at last, but for that you must inevitably and unavoidably torture just one tiny creature, ...raise [the universe] on the foundation of her unrequited tears—would you agree to be the architect on such conditions? Tell me the truth."

"No, I would not agree,"Aloysha said, and neither would we.[1] Theories flounder on the shoals of human suffering. No explanation makes it intelligible.

There are times when religious beliefs seem to make suffering even worse. I once heard two physicians agree that their religious patients had a more difficult time coming to terms with a serious illness than nonreligious ones. The believers had all sorts of why-me and why-God questions that did not perplex unbelievers. Unbelievers had fewer expectations, so they were less inclined to feel that life had let them down.

Something is obviously wrong when solutions turn out to be problems, and our attempts to make things better wind up making them worse. When we're not getting good answers to our questions, the problem isn't always the answers. Sometimes it's the questions we are asking.

The Christian Story

I would like to approach the problem of suffering as a personal, spiritual challenge, rather than a theological or philosophical one. To do so I will draw on the central story of my own faith community, the Christian church. Like all great narratives, the Gospel story reaches people who stand outside as well as inside its circle. So, I hope you'll find it applicable to your situation, whatever your religious commitments. And if you belong to another faith community, I invite you to reflect on the great stories of your own tradition and consider the ways they bear on the fundamental human problems that concern us.

The cross and the resurrection of Jesus are central to the Christian story, and they are indispensable to a Christian perspective on suffering. According to the Gospels, Jesus approached the cross with fear and apprehension. During the last night of His life, He asked His closest friends to watch with Him, and He fervently prayed that God would spare Him the bitter cup that lay ahead. His hopes notwithstanding, He endured the agony of the cross. And His cry of desolation, "My God, why hast thou forsaken me!" reveals the depths of anguish to which He sank. With His resurrection, of course, Jesus broke the power of death, reversed the condemnation of the cross, and reunited with the Father.

The cross points to the inevitability of suffering in this world. Jesus did not avoid suffering, and neither can we. At the same time, Jesus' anguish confirms our basic intuition that suffering is wrong. There is a tragic abnormality to our existence. We know that we are susceptible to suffering and death; we also sense that we were not meant for them.

The cross also affirms Jesus' solidarity with us in our sufferings. It reminds us that we are never alone, no matter how dark and oppressive our situation may be. Because Jesus endured the cross, nothing can happen to us that He has not been through Himself—physical pain and hardship, separation from family and friends, the loss of worldly goods and reputation, the animosity of those we try to help, even spiritual isolation—He knew it all.

If the cross reminds us that suffering is unavoidable, the resurrection assures us that suffering never has the last word. Jesus could not avoid the cross, but He was not imprisoned by it. The empty tomb is our assurance that suffering is temporary. From the perspective of Christian hope, the time will come when suffering will be a thing of the past.

For Christian faith, cross and resurrection are inseparable, and we must always see them together. Without the resurrection, the cross would be the last sad chapter in the story of a noble life. Jesus' death would simply illustrate the grim fact that the good often die young, with their dreams unfulfilled and their hopes dashed. In light of the resurrection, however, the cross is a great victory, the central act in God's response to the problem of suffering. So, the resurrection transforms the cross. It turns tragedy into triumph.

In a similar way, the resurrection needs the cross. Standing alone, the resurrection seems to offer an easy escape from the rigors of this world. It would lead to us to look for a detour around the difficulties of life. If God has the power to raise the dead, then surely He can insulate us from pain and sorrow; He can prevent us from suffering. But before the resurrection comes the cross. And this forces us to recognize that God often leads us through perils, rather than around them. He does not promise to lift us dramatically and miraculously out of harm's way. Just as Jesus had His cross to bear, all His followers have theirs as

well (cf. Mt 16:24). Jesus' promise to be with us in our sufferings also calls us to be with Him in His sufferings.

There is a small chapel on the Appian Way a short distance from Rome whose front wall bears the inscription, "Quo vadis, Domine?" According to legend, Peter was fleeing Rome during a time of persecution when he encountered Christ heading toward the city. "Where are you going, Lord?" he asked. And Jesus answered, "I'm going to Rome, to be crucified again." With that, Peter realized he was traveling in the wrong direction, so he turned around to be with Jesus.

Applications

This general view of things has several applications to the subject of palliative care. People who are suffering need to know, first of all, that suffering is real and suffering is wrong. Suffering involves the loss of good things. Our instinctive response to suffering is "Oh, no. This isn't right. This is not supposed to happen to me." We should affirm that insight. We were not meant to suffer.

We add insult to injury when we tell people their problems are not so bad, compared to what others have gone through, or that their difficulties are all for the best, or that this was supposed to happen for some inscrutable reason—because they need it, or deserve it, or will somehow benefit from it, or perhaps worst of all, that they are being punished through it.

A recent motion picture recounts the life of the great cellist Jacqueline Dupre. Multiple sclerosis cut short her brilliant musical career and ended her life at the age of 42. The film ends with a fantasy where the adult Jackie meets the young Jackie on the beach assures the child, "Everything's going to be all right." I don't know how that struck you if you saw the movie. But I couldn't help feeling that it was an absurd insertion in the film. Instead of mitigating the tragedy of what we had just seen, it trivialized the loss.

The fact is, everything isn't all right. Several years ago a friend of ours learned she had ovarian cancer the day her second child was born. As she struggled with the disease, well-wishers from her church assured her that God was testing her, or that God had chosen her for this special mission, or that God was getting ready to work a miracle on her behalf. All these approaches denied the reality and the magnitude of what she was facing. Needless to say, instead of easing her suffering, they compounded it.

If there are any benefits that accompany suffering, they come not because suffering is good, but in spite of the fact that suffering is bad.

The biblical book of Psalms, the longest book of the Bible, gives full expression to the depths of human woe. In fact, more than half of these ancient religious songs concern what one writer calls "the wintry landscape of the heart." There is great comfort in these poems, because suffering people need to know their sufferings are acknowledged.

Church historian Martin Marty describes losing his wife to cancer after nearly 30 years of marriage. During the months of her final hospitalization they took turns reading a Psalm at the time of each midnight medication. He read the even numbered psalms, she read the odd numbered psalms.

"But after a particularly wretched day's bout that wracked her body and my soul," he writes, "I did not feel up to reading a particularly somber psalm, so I passed over it."

"What happened to Psalm 88," she said, "why did you skip it?"

"I didn't think you could take it tonight. I am not sure I could. No: I am sure I could not."

"Please read it for me," she said.

"All right: 'I cry out in the night before thee. For my soul is full of trouble. Thou hast put me in the depths of the Pit, in the regions dark and deep.'"

"Thank you," she said, "I need that kind the most."

"After that conversation we continued to speak," Marty recalls, "slowly and quietly, in the bleakness of the midnight but in the warmth of each other's presence. We agreed that often the starkest scriptures were the most credible signals of God's presence and came in the worst time. When life gets down to basics, of course one wants the consoling words, the comforting sayings, the voices of hope preserved on printed pages. But they make sense only against the background of the dark words."[2]

Marty's experience affirms the right of people to face their suffering openly. People need to know that their trials are appreciated.

In a book responding to the loss of his son, philosopher Nicholas Wolterstorff describes the struggle to "own his grief," as he puts it. "The modern Western practice is to disown one's grief: to get over it, to put it behind one, to get on with life, to put it out of mind, to insure that it not become part of one's identity." To see his point we have only to think of the facile way newscasters talk of "healing" and "closure" just hours after some terrible tragedy has occurred. "My struggle," Wolterstorff said, "was to own [my grief], to make it part of my identity: if you want to know who I am, you must know that I am one whose son died."[3]

In a similar vein Gerald Sittser speaks of embracing the sorrow that engulfed him when he lost three members of his family in an automobile collision. To deal with the tragedy effectively, he found he could not go around his grief, he had to go through it. He had to penetrate its depths.[4]

Although it is important to acknowledge that suffering is real and suffering is wrong, it is equally important to insist that suffering does not have the last word. Suffering may be an inescapable part of our story, but it is not the whole story. We can be larger than our sufferings.

People transcend their sufferings in several ways. One is courageously refusing to let suffering dominate them. This is the central point in Viktor Frankl's well-known book, *Man's Search for Meaning*. When every freedom is taken away, one freedom always remains—the freedom to choose our response. When we cannot change our situation, we are challenged to change ourselves. And of course, the greater the challenge, the greater our courage must be. Frankl quotes Dostoyevsky: "There is only one thing that I dread, not to be worthy of my sufferings!"[5] No matter how desperate our situation, we can surmount it by refusing to let it define our significance. We can be greater than our sufferings.

This call to courage rests on the conviction that our suffering does not diminish our value as human beings. This is a message that caregivers can provide. This is especially important when we remember what our society relies on as the basis of personal worth. We glorify the young, the healthy, the athletic.

We also honor productivity, or usefulness. In fact, we identify people with what they do. Have you noticed, whenever a newspaper mentions a person's name, it always follows it with an occupation? We ask children what they want to be when they grow up. We describe older people in terms of what they used to do. We speak of them as retired schoolteachers, bus drivers, or dentists. It's as if children are not yet fully human and older persons are fully human no longer. One of the biggest concerns of people who are suffering from illness or injury is the fear of losing their usefulness. My father-in-law underwent bypass surgery for the second time last summer. One of his post-operative complaints was the fear that he could no longer be useful. If he couldn't be productive, life wasn't worth living.

I like the way certain other cultures affirm all the stages of life, including the last ones, so, no matter where you are, it's appropriate for you to be there. Hinduism sees four stages of life. The first is the student stage. The second consists of marrying and setting up a household. It runs through most of adult life. The third stage is one of withdrawal. Here people give more attention to religious matters. They move out of the household and devote themselves to spiritual pursuits. The fourth stage is not for everyone. It consists of renouncing the self that was before—giving up names, possessions and caste. One stage is not glorified at the expense of the others. Moving from one stage of life to another does not represent a loss.

We also transcend our sufferings when we realize that we do not suffer alone. God is with us in our sufferings. According to Christian faith, the story of Jesus is God's own story, and its great climax is the crucifixion—a moment of indescribable anguish. Some people believe that Christ suffered so we won't have to. But the cross represents solidarity as well as substitution. Christ not only suffers for us, Christ suffers with us.

From the Christian perspective, this is a testimony to the fact that God is with us in our suffering, that everything that happens to us makes a difference to Him. St. Paul's letter to the Romans contains the ringing assurance that nothing can separate us from the love of God in Christ Jesus—not trouble, or hardship, or persecution, or famine, or nakedness, or danger, or sword. Neither death, nor life, nor angels, nor rulers, nor things present, nor things to come, nor powers, nor height, nor depth, nor anything else in all creation—nothing can separate us from Him (Rom 8:35-39).

I used to believe that nothing could separate us from God because He is always there for us on the other side of the ordeal, no matter now bad it gets. But there's another way to look at it. None of these things can separate us from God, not because He is waiting for us after they are over, but because He is with us while they happen. In the words of the most famous passage in the Bible, "I will fear no evil, for thou art with me" (Ps 23:4).

This interpretation provides an interesting perspective on palliative care. It suggests that the role of the caregiver has spiritual significance. Its purpose is to manifest the presence of God to the sufferer—to offer the comfort and reassurance of One from whom our sufferings cannot separate us, who shares our suffering to the fullest. The caregiver refuses to abandon someone to the emptiness of suffering alone.

Suffering does not have the last word for those who have confidence for the future, so a final element in the Christian perspective on suffering is hope. One form of hope is the conviction that suffering counts for something, that it contributes to the achievement of some worthy goal. We have an instinctive desire to redeem tragedy by using it for some good purpose. Think of the good things that families often do to respond to the loss of a child, for example. We have an inherent desire to make our suffering and the suffering of those we love count for something. They must not lie there, gaping holes in the fabric of life. We must somehow mend them, learn from them, grow beyond them. And religious faith sustains this hope with the assurance that in everything God works for good (Rom 8:28).

For many people, hope also takes the shape of a future beyond death, a realm of existence where suffering is a thing of the past. It is possible to claim too much here, and it is possible to claim it in the wrong way. Any assurance of life beyond must take into account your own faith stance and that of the patient. But Christianity offers the assurance of a love that is stronger than death, a love from which not even death can separate us.

My uncle died of Parkinson's disease and was bedridden for the last four years of his life. My aunt cared for him day and night during that entire time, with the exception of a one-hour visit each day from county caregivers. The other night I asked her the questions that form the title of our conference—What hurts? What works? One of the things she mentioned was the fact that his caregivers allowed him to contribute to them. In spite of his situation, his good nature, his faith, his sense of humor, came through, and they made an impact. In fact, not long after he died, one of the caregivers made a life-changing decision in part because of his influence.

What is the meaning of pain and suffering? Suffering has no meaning. But we can find meaning in, through, and in spite of suffering, and religious faith is our greatest resource for doing so.♥

References

[1] Dostoyevsky, Fyodor, *The Brothers Karamozov,* trans. Richard Pevear and Larissa Volokhansky (San Francisco: North Point Press, 1990), p. 245.

[2] Marty, Martin E., *A Cry of Absence: Reflections for the Winter of the Heart* (Harper San Francisco, 1993), pp. xi-xii.

[3] Wolterstorff, Nicholas, "The Grace That Shaped My Life," in *Philosophers Who Believe: The Spiritual Journeys of Eleven Leading Thinkers,* ed. Kelly James Clark (InterVarsity, 1993), pp. 273-5.

[4] Sittser, Gerald L., *A Grace Disguised: How the Soul grows Through Loss* (Grand Rapids: Zondervan, 1996)

[5] Frankl, Victor E., *Man's Search for Meaning* (Washington Square, 1985), p. 8

Carr, Rice and Sorajjakool

(continued from page 1)

including "William Osler and the Doctrine of Aequanimitas" at the Spring, 1998 meeting of the Society for Health and Human Values. In addition to his doctorate from the University of Virginia, he holds degrees from Andrews University, Berrien Springs, MI, Walla Walla College, Walla Walla, WA and the University of Montana, Missoula, MT.

✦ Richard Rice, PhD, is once again a member of the Loma Linda Faculty of Religion, after having served in that capacity primarily on the campus of La Sierra University for more than two decades when it was a part of LLU. He rejoins his colleagues at Loma Linda as professor.

Dr. Rice, who served Seventh-day Adventist congregations in Grand Terrace and Riverside, California, is an accomplished educator and author who is well-known for his emphasis upon "the open," or reciprocal, view of God. He has authored six books, four chapters in anthologies, sixteen scholarly articles, fifteen book reviews, and thirty-three articles for general readers.

He has also delivered 36 presentations at scholarly meetings as well as scores of sermons and lessons for adults and children in Christian churches.

Dr. Rice is a recipient of the National Violet and Thomas Zapara Distinguished Undergraduate Teaching Award. He has also delivered the Loma Linda University Distinguished Faculty Lecture. He is a member of three professional societies and has served one of them, the Adventist Society for Religious Studies, as president.

Dr. Rice received his doctorate from the University of Chicago Divinity School where he wrote a dissertation on *Charles Hartshorne's Concept of Natural Theology.*

He is also a graduate of Andrews University and La Sierra University. He has taught 14 different undergraduate courses and 6 different courses at the graduate level.

One of the most recent expressions of Dr. Rice's distinctive theological orientation is available in *The Openness of God: A Biblical Challenge to the Traditional Understanding of God,* edited with Clark Pinnock and others, and published by Intervarsity Press.

He is married to Gail, a professor of education in the Schools of Allied Health, Medicine, and Public Health of Loma Linda University. They are the parents of Alison, age 25, and Jonathan, age 22.

Dr. Rice's article on "The Meaning of Pain and Suffering" in this issue of *Update* is the second essay it has published by him on this subject.

In its October 1986 issue, *Update* published an article by Dr. Rice titled "The Mystery of Suffering" which prompted a number of persons throughout the world to write thoughtful responses.

✦ Siroj Sorajjakool, PhD, who served as pastor, teacher, relief worker, and administrator in Thailand before coming to the United States to continue his graduate education, joined the LLU Faculty of Religion as assistant professor. He received his doctorate in Theology and Personality this Spring from Claremont School of Theology, Claremont, with a dissertation titled *"Wu Wei" (Nontrying) as Pastoral Care for Persons with Depression: Coping with Nostalgia.*

While a graduate student at Claremont, Sorajjakool received the Willis and Dorothy Fisher Scholarship for a student who "shows promise as a teacher of religion and theological studies." He also received the President's Award for Academic Excellence.

Before moving to Claremont, he received degrees from Andrews University, by studying at its extension school on the campus of Spicer College in Pune, India, and from Southeast Asia Union Seminary in Singapore.

He was a weekly volunteer at Mother Teresa's Home for the Aged while a student at Pune, India. He has also completed clinical internships at Loma Linda University Medical Center, Loma Linda University Behavioral Medicine Center, and the Christian Counseling Service in Redlands, CA.

THE NEXT

JACK W. PROVONSHA LECTURESHIP

WILL BE

MARCH 7, 2000
7:00-8:00 PM

He has authored two books in the Thai language. The translation of the title of one of these is *Ethics of a Chicken Who Refuses to End Up On a Chopping Board.* The translated title for the second is *Reflections.* He has also published eight professional articles as well as one article for general readers in English.

Dr. Sorajjakool served for two years as associate director for the Adventist Development and Relief Agency in Thailand. In that capacity he supervised two well drilling projects that established 650 wells, successfully applied for $300,000 in grants for projects in agriculture, labor migration and skill training, and also supervised student volunteers from Canada and the United States.

He also served for two years as academic dean of Mission College in Muak Lek, Thailand and for an additional five years as director of the Thailand Adventist Seminary. When he was in the classroom, he taught philosophy, theology, ethics, comparative religions, and Greek.

Dr. Sorajjakool is married to Hui-Ling Lee. Ms. Lee was a reading and English teacher in Thailand. Currently she is in nursing school. They are the parents of Chanchai, 12, who attends Cope Middle School.

Over the years, Dr. Sorajjakool has studied, lectured, and written about child prostitution in Thailand. One of these presentations, delivered at the meetings of the Western Region of the American Academy of Religion in 1996, was titled "Pastoral Care and Counseling in Social Context: A Reflection on the Case of Child Prostitution in Thailand." ♥

LOMA LINDA UNIVERSITY

MA in Clinical Ethics

The Master of Arts program in Biomedical and Clinical Ethics is designed for two types of graduate students: those now engaged in professional careers, and those who are pursuing this degree as a steppingstone to doctoral studies in a related field.

The faculty for this program explore ethical issues in health care and related fields from Christian perspectives. Students come from a variety of religious and cultural backgrounds. Mutual respect for various cultures and beliefs is emphasized on the campus and in the classroom.

The faculty is comprised of scholars in biblical and religious studies, biomedical and clinical ethics, sociology of religion, and ethical theory. Four of the ten members of the faculty are physicians with training and professional experience in clinical ethics.

The Thompson Bioethics Library at the Center for Christian Bioethics is a rich resource. The Center sponsors weekly case conferences, monthly Bioethics Grand Rounds, frequent seminars, a journal club, and an annual conference.

MA in Clinical Ministry

The Master of Arts in Clinical Ministry is designed for three types of students: those seeking to pursue graduate studies in ministry; those wishing to enhance already existing careers with graduate study in religion; and those wishing to use this degree as a steppingstone to doctoral study.

This degree furthers the educational process of caring for the whole person through the development of clinical skills. It blends two major areas of concentration: academic preparation and clinical experience.

The faculty represent a balance between academic expertise and clinical experience, as well as a variety of disciplines including biblical studies, theology, practical theology, marriage and family therapy, cultural psychology, American church history, health education, and ethics.

E-Mail: rlroberts@rel.llu.edu
lmmohr@rel.llu.edu

E-mail: gwinslow@rel.llu.edu
gsample@ethicscenter.llu.edu

Be sure to visit our Web sites:

for Clinical Ethics:
www.bioethics.llu.edu

for Clinical Ministry:
www.ministry.llu.edu

CENTER FOR CHRISTIAN BIOETHICS
LOMA LINDA UNIVERSITY
Coleman Pavilion, Suite 11121S
Loma Linda, CA 92350
Address Correction Requested